

APPENDIX C

**FORMAT FOR REQUESTING FUNDS
CLASS 310/CLASS 320/CLASS 330
REHABILITATION PROJECTS**

FROM: _____(DISTRICT)

TO: CECW-OE

SUBJECT: Request for Rehabilitation Project Funds, Class 310/320/330

CLASS: _____

CWIS # _____ (If this cannot be located or sustained, please indicate that HQ assign a new one.)

PROJECT COSTS ESTIMATE:*

Engineering & Design \$ _____
(When requesting E&D only, provide projected date of bid opening and estimated cost of contract)

Construction Contracts \$ _____

Contingency (request no more than 10% without justification) \$ _____

Supervision and Administration \$ _____

Total Amount Required \$ _____

E&D Received (-) \$ _____

Other Amounts Received (-) \$ _____

Total Funds Required \$ _____

Chief, Emergency Management

*If cost shared, list only Federal share.

SAMPLE MISSION ASSIGNMENT

FEDERAL EMERGENCY MANAGEMENT AGENCY MISSION ASSIGNMENT (MA)	See Reverse for Paperwork Burden Disclosure Notice	O.M.B. NO. 3067-0278 Expires February 29, 2004
I. TRACKING INFORMATION (FEMA Use Only)		
State:		Action Request #:
Program Code/Event #:		Date/Time Rec'd:
II. ASSISTANCE REQUESTED <input type="checkbox"/> See Attached		
Assistance Requested:		
Quantity:	Date/Time Required:	Internal Control #:
Delivery Location:		
Initiator/Requestor Name:	24-hour Ph/Fax #s:	Date:
POC Name:	24-hour Ph/Fax #s:	Date:
* State Approving Official (Required for DFA and TA):		Date:
III. INITIAL FEDERAL COORDINATION (Operations Section)		
Action to:	<input type="checkbox"/> ESF #: <input type="checkbox"/> Other:	Date/Time: Priority: <input type="checkbox"/> 1 Lifesaving <input type="checkbox"/> 2 Life sustaining <input type="checkbox"/> 3 High <input type="checkbox"/> 4 Medium <input type="checkbox"/> 5 Normal
IV. DESCRIPTION (Assigned Agency Action Officer) <input type="checkbox"/> See Attached		
Mission Statement:		
Assigned Agency:	Projected Start Date:	Projected End Date:
<input type="checkbox"/> New or <input type="checkbox"/> Amendment to MA #:	Total Cost Estimate: \$	
Assigned Agency POC Name:	Phone and fax #s:	
V. COORDINATION (FEMA Use Only)		
Type of MA:	<input type="checkbox"/> Direct Federal Assistance State Cost Share (0%, 10%, 25%)	<input type="checkbox"/> Technical Assistance State Cost Share (0%) <input type="checkbox"/> Federal Operations Support State Cost Share (0%)
State Cost Share Percent: %	State Cost Share Amount: \$	
Fund Citation: ____ - 06 - ____ - 9 ____ 4 - 250 ____ -D	Appropriation code: 70X0702	
Mission Assignment Coordinator (Preparer):		Date:
** FEMA Project Officer/Branch Chief (Program Approval):		Date:
** Comptroller/Funds Control (Funds Review):		Date:
VI. APPROVAL		
* State Approving Official (required for DFA and TA):		Date:
** Federal Approving Official (required for all):		Date:
VII. OBLIGATION (FEMA Use Only)		
Mission Assignment #:	Amt. This Action: \$	Date/Time Obligated:
Amendment #:	Cumulative Amt. \$	Initials:
*Signature required for Direct Federal Assistance and Technical Assistance MAs. ** Signature required for all MAs.		
FEMA Form 90-129, OCT, 02		

INSTRUCTIONS

Paperwork Burden Disclosure Notice

Public reporting burden for this is estimated to average 20 minutes per response. The burden estimate includes the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the form. You are not required to respond to this collection of information unless a valid OMB control number is displayed in the upper right corner of this form. Send comments regarding the accuracy of the burden estimate and any suggestions for reducing the burden to : Information Collections Management, Federal Emergency Management Agency, 500 C Street, SW, Washington, DC 20472. NOTE: Do not send your completed form to this address.

Items on the Mission Assignment (MA) form that are not specifically listed are self-explanatory.

I. Tracking Information. COMPLETED BY ACTION TRACKER OR OTHER OPERATIONS STAFF. REQUIRED FOR ALL REQUESTS.

State: If multi-State, choose State most likely to receive resources, (i.e., when using 7220-SU Program Code).

Action Request #: Based on chronological log number. Used for tracking.

Program Code/Event #: The pre-declaration, emergency, or major disaster number assigned for funding the event. Examples: 7220-SU, 4220-AD, 3130-EM, 1248-DR.

II. ASSISTANCE REQUESTED. Completed by requestor.

Assistance Requested: Detail of resource shortfalls, give specific deliverables, or simply state the problem.

Internal Control #: Internal requestor reference, log, or control number, if applicable.

Initiator/Requestor: The initiator may be an individual filling out the MA and making a request on behalf of the POC.

POC Name: The person coordinating reception and utilization of the requested resources. 24-hour contact information required.

State Approving Official: Signature certifies that State and local government cannot perform, nor contract for the performance, of the requested work.

III. INITIAL FEDERAL COORDINATION. Completed by the Operations Section Chief.

Action to: Operations Chief notes assigned organization. May be Emergency Support Function (ESF), internal FEMA organization, or other organization, which assigns the Action Officer.

* *Rest of MA used only if solution to request requires Federal agency to perform reimbursable work under mission assignment (MA). Best solution may be internal resources or commercial vendor. Deliberate evaluation must occur before MA is completed and MA is issued.*

IV. DESCRIPTION. Completed by assigned agency Action Officer.

Mission Statement: Description of steps to complete the request. Include discussion of personnel, sub-tasking agencies, contracts and other resources required. This can be provided as an attachment.

Assigned Agency: Agency receiving the MA from FEMA. Activities within the scope of an ESF result in an MA to the primary agency. Cite subordinate organization if applicable. Example: DOT-FAA, COE-SAD.

Project Completion Date/End Date: If end date is not clear, estimate and budget for 30 or 60 days, then re-evaluate. TBD is not acceptable; some date must be entered into this field.

Total Cost Estimate: A budget can be attached outlining personnel, contract, sub-tasking agency, travel, and other costs.

V. COORDINATION. Completed by MAC, except for Project Officer and Comptroller signatures.

Type of MA: Select only one.

Appropriation Code: Static data. Do not change. This is for information only, should not be used to report internal agency finances to Treasury.

VI. APPROVAL. Completed by State Approving Official and Federal Approving Official.

VII. OBLIGATION. Completed by Financial Specialist.

Mission Assignment #: Assigned in FEMA financial system chronologically using assigned agency acronym and two-digit number.

Amendment #: Note supplement number. For example: COE-SAD-01, Supp. 1, or DOT-08, Supp. 3.

Amount this Action: Taken from total cost estimate above.

Cumulative Amount: Cumulative amount for this MA, including all amendments.

Attachment #2

MISSION ASSIGNMENT TASK ORDER

TRACKING INFORMATION (FEMA USE ONLY)			
Mission Assignment #:		Entered By:	
Tasking #:	SU/EM/DR #:	Date/Time Entered:	<input type="checkbox"/> Originated as verbal
A. Requirements/Task Order Description <input type="checkbox"/> See Attached			
Description of Tasking under Existing Mission Assignment:			
NUMBER-	ISSUED TO-	DATED-	
Tasking Originator: (Name/Organization)		24-hour Phone # Fax #:	
Quantity:	Priority: <input type="checkbox"/> 1 Lifesaving <input type="checkbox"/> 2 Life sustaining <input type="checkbox"/> 3 High <input type="checkbox"/> 4 Medium <input type="checkbox"/> 5 Normal	Date/Time Needed:	
Delivery Site Location and/or Instructions:			
State POC:		24-hour Phone/ fax #s	
Site POC:		24-hour Phone/ Fax #s:	
FEMA Project Officer:		24-hour Phone/ Fax #s:	
Action Officer:		24-hour Phone/ Fax #s:	
B. APPROVALS			
Project - 22 -Officer for Existing Mission Assignment:		24-hour Phone # Fax #:	Date:
C. DISPOSITION			
<input type="checkbox"/> Task Issued:	Date Issued:	Issued By:	

Instructions – Originator Complete Section A Only

This form is used when a Mission Assignment is issued with a scope of work that will require specific follow-on taskings to effect execution. The tasking may originate at the State or by a federal entity responsible to determine such taskings. If the tasking is against a Mission Assignment that has a State cost share, a State Approving Official must concur and sign the form. This form will not be used to amend the scope of work or change funding levels of a Mission Assignment. A copy of this properly executed form must be attached to the authorizing Mission Assignment MA. Task orders for each mission assignment will be numbered sequentially, starting with 001.

SAMPLE MEMORANDUM FOR RECORD FOR VERBAL FUNDING AUTHORITY

MFR

DATE

SUBJECT: FEMA Verbal Mission Assignment

1. On (date/time) verbal funding authority for the following mission assignment has been ordered by _____ at FEMA Region ____ for the U.S. Army Corps of Engineers.

Mission:

FEMA Program Code: _____ (For pre-declaration the program code will be 7220-SU, for post-declaration the code will be either 3XXX-EM or 1XXX-DR)

Mission Assignment Number: (i.e., 7220SU-FL-COE-SAD-01 or 1539DR-FL-COE-SAD-01)

Event and Name Description:

Disaster State (2 letter designation):

Estimated Completion Date:

Amount Authorized:

Total Amount Authorized for the Mission:

Federal Approving Official:

2. Funding for this mission assignment may be entered into the accounting system based upon a verbal authority. The source appropriation is 70X0702. An example of fund citation is 2005-06-1539DR-9044-XXXX-2508-D. This verbal mission assignment will be followed up by a Mission Assignment (MA) within 2-3 days. The MA Number is subject to change and if different will be entered in the revised MA field on the customer order.

Signature
Name
U.S. Army Corps of Engineers

Signature
Name
FEMA

SAMPLE GOVERNMENT ORDER FOR EMERGENCY MANAGEMENT ACTIVITIES (STAFFORD ACT)

MILITARY INTERDEPARTMENTAL PURCHASE REQUEST

PAGE 001

FSC	CONTROL SYMBOL NO.	DATE PREPARED 02-JUL-2000	MIPR/OBLIGATION/DELIVERY ORDER NUMBER W32CS501840001	AMEND NO. 0
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TO: USAED, GREAT LAKES & OHIO RIVER
ATTN: CELRD-RM-B
P.O. BO 1159

CINCINNATI, OH 45201-1159

FROM: USAED, JACKSONVILLE
ATTN: SESAJ-CO-E
P.O. BOX 4970

JACKSONVILLE, FL 32232-4970

ITEMS ___ ARE ___ ARE NOT INCLUDED IN THE INTERSERVICE SUPPLY SUPPORT PROGRAM AND REQUIRED INTERSERVICE SCREENING ___ HAS ___ HAS NOT BEEN ACCOMPLISHED.

ITEM NO.	DESCRIPTION (Federal stock number, nomenclature, specification and/or drawing No., etc)	QTY	UNIT	UNIT	TOTAL PRICE
0001	DISTRICT/DIV (i.e., SAJ) MISSION DESCRIPTION (i.e., REGIONAL ACTIVATION) MISSION ASSIGNMENT NUMBER (i.e., 1561DR-FL-COE-SAD-01)	0	LS	.00	\$25,000.00

ACCOUNTING CLASSIFICATION 96 NA 3125.0000 H0 X 08 2435 099993 2530 001T3P 210 96330
WORK CAT CODE: 025000 WORK CAT ELEM CODE: BBA00

REMARKS: (Must Include)

ASSIGNMENT NUMBER 1561DR-FL-COE-SAD-01 TO PROVIDE SUPPORT TO FEMA REGION 4 IN SUPPORT OF HURRICANE JEANNE. THIS INCLUDES ADMINISTRATIVE COSTS TO INCLUDE OVERTIME AND TRAVEL EXPENSES. USE COMMAND INDICATOR 'CODE 99FEM WHEN CREATING THE WORK ITEM FOR THIS GOVERNMENT ORDER. Please include the following information on the "CUSTOMER REF NO" mission assignment# (i.e., 1561DR-FL-COE-SAD-02) FEMA fund citation (i.e., 2004-06-1561DR-9044-2508-D) and on the "OTHER CUST REF NO" supporting district work item (i.e., 1KGD7F) mission (i.e., REGIONAL ACTIVATION) disaster name (i.e., HURRICANE JEANNE)
RENTAL CAR IS NOT AUTHORIZED.

Please have the accepting official sign below and electronically transmit to the FINANCIAL POC address. EXPIRATION DATE 30-SEP-2000

ACCEPTED REIMBURSABLE ORDER _____ DATE _____ TITLE _____
SEE ATTACHED PAGES FOR DELIVERY SCHEDULES, PRESERVATION AND PACKAGING GRAND TOTAL
INSTRUCTIONS, SHIPPING INSTRUCTIONS AND INSTRUCTIONS FOR DISTRIBUTION OF \$25,000.00
CONTRACTS AND RELATED DOCUMENTS.

TRANSPORTATION ALLOTMENT (Used if FOB Contractor's plant)

MAIL INVOICES TO (Payment will be made by)

FUNDS FOR PROCUREMENT ARE PROPERLY CHARGEABLE TO THE ALLOTMENTS SET FORTH ABOVE, THE /S/ TERRIE G. ROSARIO
AVAILABLE BALANCES OF WHICH ARE SUFFICIENT TO COVER THE ESTIMATED TOTAL PRICE. BUDGET ANALYST 2-JUL-2000

AUTHORIZING OFFICER HUG J EVANS BUDGET OFFICER	SIGNATURE /S/ HUGH J EVANS	DATE 2-JUL-2000
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DD FORM 448

NOTE: ADMINISTRATIVE COSTS INCLUDES LABOR, THE EFFECTIVE RATE, PLUS G&A AND DOH COSTS.
ENSURE THAT A STATEMENT IS INCLUDED ON GO WHEN RENTAL CAR IS AUTHORIZED.

October 30, 2000

DIRECT CHARGE MATRIX

The matrix below provides guidance for charges of Corps employees performing duties **in support of a FEMA mission** issued under the Stafford Act. *(This does not include back filling deployed or reassigned personnel):*

<u>REGULAR CHARGE</u>	<u>LOCATION</u>	<u>STRAIGHT TIME</u>	<u>OVERTIME</u>	<u>TDY</u>
General Expense - HQ USACE (96X3124) (Includes Civil Funded Military)	Home Organization			
	(A) UOC* Permanent & Temporary Assigned Personnel <i>(Example: Headquarters RM (Resource Management) employee working in the UOC full-time as supplemental staffing.)</i>	96X3124	96X3125, CCS 210	N/A
	(B) Other <i>(Example: HQ RM employee working from desk in RM performing incidental support.)</i>	96X3124	96X3125, CCS 210	N/A
	(C) TDY to Supported Division/District EOC <i>(Example: HQ HR employee is deployed to South Atlantic Division EOC as supplemental staffing.)</i>	96X3124	96X3125, CCS 210	96X3125, CCS 210
	(D) TDY to ROC, ERT-A, DFO, ERRO, or Disaster Site <i>(Note: Straight time for supervision and oversight visits will be charged to 96X3124 and are not chargeable to FEMA.) (Example: HQ RM employee on TDY to ERRO.)</i>	96X3124	FEMA Mission	FEMA Mission

*UOC – U.S. Army Corps of Engineers Headquarters Emergency Operations Center

<u>REGULAR CHARGE</u>	<u>LOCATION</u>	<u>STRAIGHT TIME</u>	<u>OVERTIME</u>	<u>TDY</u>
General Expense – Divisions (96X3124) (Includes Civil Funded Military)	Home Organization (E) EOC Permanent & Temporarily Assigned Personnel <i>(Example: RM employee working in the EOC full-time as supplemental staffing.)</i>	96X3124	96X3125, CCS 210	N/A
	(F) Other <i>(Example: HQ RM employee working from desk in RM performing incidental support.)</i>	96X3124	96X3125, CCS 210	N/A
	(G) TDY to Supported Division/District EOC <i>(Example: Great Lakes and Ohio River Division HR employee deployed to South Atlantic Division EOC)</i>	96X3124	96X3125, CCS 210	96X3125, CCS 210
	(H) TDY to ROC, ERT-A, DFO, ERRO, or Disaster <i>(If charge is to FEMA Mission, supervision and oversight is not included.) (Example: North Atlantic Division Information Management (IM) employee deployed to ERRO in San Juan, Puerto Rico.)</i>	96X3124	FEMA Mission	FEMA Mission
	(I) TDY to Supported Division/District EOC <i>(Example: HR employee is deployed to Jacksonville District EOC.)</i>	96X3124	96X3125, CCS 210	96X3125, CCS 210
General Expense Labs (96X3124) (Includes Civil Funded Military)	(J) TDY to ROC, ERT-A, DFO, ERRO, or Disaster <i>(Example: IM employee is deployed to ERRO in San Juan, Puerto Rico.)</i>	96X3124	FEMA Mission	FEMA Mission

EP 37-1-6
31 Aug 07

<u>REGULAR CHARGE</u>	<u>LOCATION</u>	<u>STRAIGHT TIME</u>	<u>OVERTIME</u>	<u>TDY</u>
Operations & Maintenance, Army (21*2020)	(K) Home Organization HQ's USACE <i>(Example: Real Estate Specialist assisting with an Emergency Event)</i>	21*2020	96X3125, CCS 210	N/A
	(K1) Home Organization Division/District OMA Funded Personnel	21*2020	96X3125, CCS 210	N/A
	(L) TDY to Supported Division/District EOC <i>(Example: HR employee is deployed to Jacksonville District EOC.)</i>	21*2020	96X3125, CCS 210	96X3125, CCS 210
	(M) TDY to ROC, ERT-A, DFO, ERRO, or Disaster Site <i>(Example: Real Estate Specialist is deployed to ERRO in San Juan, Puerto Rico.)</i>	21*2020	FEMA Mission	FEMA Mission

<u>REGULAR CHARGE</u>	<u>LOCATION</u>	<u>STRAIGHT TIME</u>	<u>OVERTIME</u>	<u>TDY</u>
General & Administrative (96X4902) <i>-Revolving Fund-</i>	(N) Home District Office <i>(Example: District Budget Officer loads funds from RM.)</i>	96X4902	FEMA Mission	N/A
Note: Straight-time for employees assigned to and performing G&A functions of Counsel Equal Employment Opportunity, Safety and Occupational Health, and Contracting will be in accordance with ER 37-2-10, Chapter 24, paragraph 24-2d, 2g, 2h, and 2l and will exclude the cost of supervising and directing the contracting activities.				
	(O) Home District Areas of Responsibility	96X4902	FEMA Mission	FEMA Mission
<i>(Example: Non-PRT Jacksonville District Logistics Management employee TDY to disaster site in San Juan, Puerto Rico. Includes any G&A field office employee.)</i>				
NOTE: Straight-time for PRT members may be charged to a FEMA mission only under the following exceptions reflected below as (O1) and (O2):				
	(O1) <u>EXCEPTION 1</u>	FEMA Mission	FEMA Mission	FEMA Mission
NOTE: PRT member is deployed with TDY orders in accordance with applicable PRT rotation policy to perform PRT duties under a FEMA mission.				
<i>(Example: Jacksonville District Logistics Management employee is deployed to San Juan, Puerto Rico, as a member of the Emergency Power PRT.)</i>				
	(O2) <u>EXCEPTION 2</u>	FEMA Mission	FEMA Mission	N/A
NOTE: PRT member is assigned full-time in accordance with applicable PRT rotation policy to perform PRT duties under a FEMA mission to a disaster/emergency response site within the same geographical location as the PRT member's home office of assignment.				
<i>(Example: Deputy Chief of Staff for Resource Management assigns Wilmington District Resource Management PRT member to ERRO which is co-located with the Wilmington District home office.)</i>				

<u>REGULAR CHARGE</u>	<u>LOCATION</u>	<u>STRAIGHT TIME</u>	<u>OVERTIME</u>	<u>TDY</u>
General & Administrative (96X4902) (Cont'd)	(P) Home District – EOC	96X4902	96X3125, CCS 210	N/A
	<i>(Example: Resource Management secretary is assigned full-time to the EOC.)</i>			
	(Q) TDY from Supporting District to Supported District EOC	96X3125, CCS 210	96X3125, CCS 210	96X3125, CCS 210
	<i>(Example: Los Angeles District Logistics Management employee is deployed to Jacksonville District EOC.)</i>			
	(R) TDY to ROC, ERT-A, DFO, ERRO, or Disaster Site	FEMA Mission	FEMA Mission	FEMA Mission
	<i>(Example: Los Angeles District Logistics Management employee is deployed to ERRO in San Juan, Puerto Rico.)</i>			
	(Note: Straight-time charges for Supported District employees TDY to ERRO/Disaster Site located within the District's area of responsibility will be in accordance with (O) and (O1) above.)			
Project/Reimbursable Funded Employees	(S) HQ USACE, Supported Division/ District EOC	96X3125, CCS 210	96X3125, CCS 210	96X3125, CCS 210
	<i>(Example: San Francisco District Project Manager is deployed to Wilmington District EOC.)</i>			
	(T) TDY to ROC, ERT-A, DFO, ERRO, or Disaster Site	FEMA Mission	FEMA Mission	FEMA Mission
	<i>(Example: Savannah District Engineer is deployed to disaster site.)</i>			

<u>REGULAR CHARGE</u>	<u>LOCATION</u>	<u>STRAIGHT TIME</u>	<u>OVERTIME</u>	<u>TDY</u>
Military-Funded Military Member	(U) Supported Division/ District EOC	Defense Approp Act	N/A	96X3125, CCS 210
	<i>(Example: Mobile District-PM Captain is pulled off of Redstone Arsenal project and is assigned to the EOC..)</i>			
	(V) TDY ROC, ERT-A, DFO, ERRO, or Disaster Site	Defense Approp Act	N/A	FEMA Mission
	<i>(Example: Mobile District-EN Captain is pulled off of Redstone Arsenal project and is deployed to ERRO in Virgin Islands, Puerto Rico.)</i>			
Civil-Funded Military Member	(W) Supported Division/ District EOC	96X3125, CCS 210	N/A	96X3125, CCS 210
	<i>(Example: Jacksonville District Project Manager is pulled off of Central & Southern Florida Ecosystem Restoration Project and is assigned to South Atlantic Division EOC.)</i>			
	(X) TDY to ROC, ERT-A, DFO, ERRO, or Disaster Site	FEMA Mission	N/A	FEMA Mission
	<i>(Example: Jacksonville District Project Manager is pulled off of Central & Southern Florida Ecosystem Restoration Project and is assigned to ERRO.)</i>			

(Includes Civil-Funded Military Members assigned to G&A organizations, i.e., Acting Deputy Resource Management Officer (Major).)

EP 37-1-6
31 Aug 07

REGULAR CHARGE	<u>LOCATION</u>	<u>STRAIGHT TIME</u>	<u>OVERTIME</u>	<u>TDY</u>
Reservists on Active Duty	(Y) TDY to HQ USACE Supported Division/District EOC <i>(Example: Individual Mobilization Augmentee activated and deployed to Jacksonville District EOC.)</i>	96X3125, CCS 210	N/A	96X3125, CCS 210
	(Z) TDY to ROC, ERT-A, DFO, ERRO, Disaster Site <i>(Example: Individual Mobilization Augmentee activated and deployed to Disaster Site.)</i>	FEMA Mission funds	N/A	FEMA Mission

For more information go to www.fema.gov/ofm/ofed_agencies.shtm

SAMPLE

**MISSION ASSIGNMENT REIMBURSEMENT REQUEST
TRANSMITTAL FORM**

SECTION I : ESF AGENCY SUBMISSION			
AGENCY:		Current Bill Amount:	
ADDRESS:		Fiscal POC:	
		Phone:	
		Fax:	
Type of Billing:		<input type="checkbox"/> SF#1080 <input type="checkbox"/> SF 1081 (OPAC) <input type="checkbox"/> Other:	
Agency Location Code:		ESF #	
ESF Agency Bill Number:		Primary ESF Tasking:	
MA Number:		Support ESF Tasking:	
Mission Description:		FEMA Disaster Number:	
Projected Completion Date:		Revised Completion Date:	
This is a partial bill <input type="checkbox"/> Resubmittal <input type="checkbox"/> Final Bill <input type="checkbox"/> no further obligations pending.			
The expenditures claimed have been reviewed and are relevant to the mission assigned. Costs are reasonable, supported by source documents maintained by this agency, and are not funded by another source. <i>(Include applicable signatures)</i>			
Primary ESF Agency Project/Program Administrator		Date	Phone
Support ESF Agency Project/Program Administrator		Date	Phone
Primary ESF Agency Financial Officer		Date	Phone
Support ESF Agency Financial Officer		Date	Phone
Attachments:		Attachments: Purchase of Equipment Forms	
<input type="checkbox"/> SF 1081 (OPAC)		Refer to the Financial Management Annex to	
<input type="checkbox"/> SF 1080		the Federal Response Plan (FRP) for	
<input type="checkbox"/> Other Treasury Approved Form		applicable forms.	

SECTION II : FEMA USE ONLY

LOG# _____ PAYMENT AMOUNT APPROVED: _____

State Cost Share %: _____

State Cost Share Amount: _____

ROUTING	SIGNATURE AND DATE				
FINANCIAL REVIEW					
EXCEPTION: Returned to Agency					
PROGRAM REVIEW					
MISSION ASSIGNMENT COORDINATOR REVIEW					
<table border="1" style="display: inline-table; border-collapse: collapse;"> <tr> <td style="width: 30px; text-align: center;">** LOGISTICS REVIEW</td> <td style="width: 20px; text-align: center;">YES</td> </tr> <tr> <td></td> <td style="text-align: center;">NO</td> </tr> </table>	** LOGISTICS REVIEW	YES		NO	
** LOGISTICS REVIEW	YES				
	NO				
DRM APPROVAL					
FORWARD FOR REIMBURSEMENT/ PAYMENT					
FINAL PAYMENT / DEOBLIGATION	DE-OBLIGATION AMT: _____				

To receive reimbursement, completion of this form is required.

**** Any bill that includes property will not be considered approved unless Logistics signature is obtained**

**MISSION ASSIGNMENT REIMBURSEMENT REQUEST
TRANSMITTAL FORM**
Continuation (Page 2)

SECTION III: BILL SUBMISSIONS				
ESF AGENCY BILL ID NUMBER:		Previously Billed Amount:		
Number of bills submitted for this MA (including this bill)		Current Bill Amount:		
Total MA obligation (from RFA)		Total Billed to date: (including this bill)		
CURRENT CHARGES				\$ AMOUNT
Regular Hours - Unappropriated ONLY				
Overtime or premium pay hours				
11xx Unappropriated wages, OT, and premium pay				
21 xx Travel of persons				
22xx Transport of things				
25xx Service Contracts				
25xx Equipment Lease Contracts				
26xx Materials				
31xx Equipment				
31xx : "Sensitive" items				
31xx : Agency Stock replacement / repair				
Overhead (List each line item)	Qty.	Rate	=	\$0.00
			=	\$0.00
			=	\$0.00
			=	\$0.00
			=	\$0.00
			=	\$0.00
			=	\$0.00
			=	\$0.00
			=	\$0.00
			=	\$0.00
			=	\$0.00
All Other (List each line item)	Qty.	Rate	=	\$0.00
			=	\$0.00
			=	\$0.00
			=	\$0.00
			=	\$0.00
			=	\$0.00
			=	\$0.00
			=	\$0.00
			=	\$0.00
TOTAL AMOUNT BILLED				\$0.00

Regular labor of permanent federal agency personnel and overhead cost are not eligible for reimbursement except when costs incurred would normally be paid from a trust, revolving or other fund. The Financial Manager of the agency requesting reimbursement for these costs must provide written certification with the bill stating that costs would normally be paid from a trust, revolving or other fund.

Agencies that qualify and may be seeking reimbursement must submit certified annual overhead rate proposals to FEMA OFM/DFD for approval prior to billing. OMB Circular A-87 should be used as a guide for this purpose. Indirect cost pools must be defined to explain how the costs are derived and applied. Indirect rates should be negotiated with FEMA annually.

References: [FEMA Mission Assignment Billing and Reimbursement Checklist](#)
MA Progress report and instructions <http://www.fema.gov/ofm/maprogress>

ESF MISSION ASSIGNMENT SUBTASKING REQUEST

FEMA-Assigned MA Number: _____	ESF Primary Agency _____	
Subtasking Agency _____	State _____	Disaster No. _____

Tasking Statement/Statement of Work

Project Completion Date: _____ Authorized Funding: _____

<p>Reimbursement Procedure: Upon completion of scope of work, the subtasking Federal agency will submit a SF 1081, or other approved Treasury form to request reimbursement, detailing expenditures and activities to:</p> <p>_____ (ESF Primary Agency)</p> <p>_____ (Address)</p> <p>The ESF primary agency will:</p> <ul style="list-style-type: none">(1) Review the reimbursement request and recommend approval or disapproval within 10 workdays of receipt.(2) Return approved reimbursement requests to subtasking agencies that use the Intra-governmental Payment and Collection (IPAC) system for transaction processing and simultaneously forwarding supporting documentation to the DFC.(3) Forward approved reimbursement requests from non-IPAC agencies to the Disaster Finance Center. The Disaster Finance Center will send payment directly to the subtasking agency for non-IPAC agencies.

Statutory Authority: Robert T. Stafford Disaster Relief and Emergency Assistance Act of 1988, as amended, 42 U.S.C 5121-5201.

Authorizing Officials:

The work described in the above tasking statement will be completed in support of the Federal Response Plan.

Authorizing Official, Subtasking Agency Date

Authorizing Official, ESF Primary Agency Date

Following signatures please provide information copy to FEMA MAC and Project Officer.

FEMA BILLING CHECKLIST

DECLARATION NUMBER _____

MISSION ASSIGNMENT NUMBER _____

1. Are the address, source, and financing appropriation on the bill correct?
2. Is there verification by an emergency management official that all costs are properly documented, reasonable and presented in requested format?
3. Does the bill cite the FEMA assigned disaster number and mission assignment number under which the work was performed?
4. Does the bill show the amount previously billed, currently billed, and cumulatively billed?
5. Did you include the customer order detailed cost report from CEFMS?
6. If accountable property, is there a bill of lading with serial and model numbers attached?
7. On final billing, did LM provide list of accountable property? If yes, is disposition form attached to final bill?
8. Is bill and customer order detailed cost report from supporting MSC/Districts attached to supported MSC/District's bill?
9. Is the FEMA transmittal form completed and signed, with a copy of mission assignment, any verbals, bills and customer order detailed cost report attached?
10. If work is performed by an outside agency, have you included signed back up documentation to support work performed?

Completed by: _____ Date: _____

**SAMPLE GOVERNMENT ORDER CLOSEOUT MEMORANDUM BETWEEN USACE
ACTIVITIES**

CEXXX-RM-F

(DATE)

MEMORANDUM FOR: Commander, (SUPPORT SITE)

SUBJECT: Close-Out of _____ (FEMA DISASTER/MISSION)

1. The _____ District is aggressively pursuing the financial closeout of FEMA mission assignments related to the Corps of Engineers _____ recovery efforts. This mission has been physically completed as of _____ (DATE MISSION WAS COMPLETED). In order to financially close out this mission, we must ensure that all financial documents have been reviewed and closed.

2. Our records show excess funds in the following Government Order for your site:

GOV ORDER	AUTHORIZED	AMOUNT BILLED	AMOUNT BALANCE
-----------	------------	------------------	-------------------

3. The government order listed above is related to FEMA mission _____ (STATE MISSION). I request your assistance in forwarding to us any final billings from your site on this government order. Upon receipt of the final billing, we will initiate an amendment to the Government Order to revoke the remaining balance. In order to finalize our records, if a final bill is not received within 45 days of this memo, an amendment to decrease the remaining balance on the above Government Order will be automatically issued. Any bills submitted after the Government Order has been decreased will be returned to your site unpaid.

4. Your site's support for _____ (MISSION) is greatly valued. Your continued support in helping to financially closeout these missions will be appreciated.

5. Your point of contact is _____ (NAME/TELEPHONE NUMBER).

SAMPLE FINANCIAL CLOSEOUT MEMORANDUM

**FEMA XXX-XX-XX DISASTER
FINANCIAL CLOSEOUT
MISSION XX - (MISSION TITLE)**

The closeout letter for physical completion was sent to FEMA on _____(DATE) and concurred by FEMA on _____(DATE). A financial completion document will be sent to FEMA upon completion of the following certifications.

I certify that all work is complete for this mission assignment.

Chief, Construction Division

Date

I certify that I have received a final pay notification for each contract awarded for this mission assignment.

Chief, Contracting Division

Date

I certify that all commitments, obligations, expenditures, and collections are completed for this mission assignment.

Chief, Resource Management Office

Date

I certify that all FEMA financial requirements have been met for this mission assignment.

Chief, Emergency Management

Date

NOTE:

1. If you do not concur with your certifying statement, indicate your reasons and return this document to Emergency Management.
2. Where Construction Division is not involved, only Contracting Division, Emergency Management and Resource Management signatures are required.

FINANCIAL CLOSEOUT CHECKLIST

1. Have all costs been recorded and liquidated?
2. Have all airline tickets been finalized?
3. Have all deobligations been performed?
4. Have all PR&C's been reduced to zeroed (decommitted)?
5. Have all MIPRS (government orders/customer orders) been finalized?
6. Has LM provided a copy of the property transfer document transferring all accountable property to FEMA?
7. Have all listings of accountable property been provided to FEMA?
8. Have all outstanding contract claims been settled? If not, is the liability recognized in the accounting records?
9. Have all costs been billed and/or refunded to FEMA?
10. Have all bills (including those under \$100) been generated and collected/paid?
11. Were expenditures reviewed to be certain they were relevant to the mission assigned and that claimed costs are reasonable and supported?
12. Do you have the physical close out completion letter from the EM (See Appendix ?)?

Completed by:_____ Date:_____

SOP - PROCESSING CUSTOMER ORDER REFUNDS

**DEPARTMENT OF THE ARMY
U.S. ARMY CORPS OF ENGINEERS
FINANCE CENTER
5722 INTEGRITY DRIVE
MILLINGTON, TENNESSEE 38054-5005**

CEFC-FR
SOP Number UFC-16

Revised: 26 April 2004

**STANDING OPERATING PROCEDURE
PROCESSING CUSTOMER ORDER REFUNDS**

1. PURPOSE: This Standing Operating Procedure (SOP) defines the USACE Finance Center (UFC) procedure for processing customer order refunds (credit billings).

2. APPLICABILITY: The provisions of this SOP apply to both the UFC and activities supported by the UFC. Accountants and accounting technicians at the UFC, billed activities, and supported activities must interact in order to process unbilled credits on customer orders in an efficient and timely manner.

3. REFERENCES:

- a. CEFC-F SOP Number UFC-02, Accounts Receivable/Payment of Government Orders, dated 19 April 2004.
- b. CEFC-F SOP Number UFC-14, Intra-Governmental Payments and Collections (IPAC), dated 5 April 2002 (being revised).
- c. CEFC-QR SOP Number UFC-09, Establishing FEMA Customer Orders & Preparing Reimbursable Billings, dated 6 February 2004.

4. DEFINITIONS:

- a. Customer Order Refund - a credit billing generated in CEFMS against a customer order thereby producing a check or IPAC credit at the next month's billing cycle.
- b. SF 1080 or DA Form 4445-R, Voucher for Transfer Between Appropriations or Funds - forms used as billing instruments for debt within government.
- c. Supported Activities - those Corps of Engineers Divisions, Districts, Laboratories, or Field Operating Activities whose finance and accounting functions are performed by the UFC.

CEFC-FR
SOP Number UFC-16

Revised: 26 April 2004

d. Requesting Activity - used herein to refer to the entity (may be a non-supported UFC activity or other government agency) that placed a request for goods or services from a performing activity.

e. Performing Activity - used herein to refer to the entity that received a request for goods or services from a requesting activity.

5. RESPONSIBILITIES:

a. USACE Finance Center. The Director, USACE Finance Center, through the Deputy Director of Finance, is responsible for:

- (1) Generating all customer order bills, including customer order refunds or credit bills.
- (2) Collecting customer order refund checks or IPAC credits to the appropriate supported activity.

(3) Coordinate all out-of-cycle generation of bills for supported activities with Disbursing Division. Out-of-cycle generation of bills causes problems with the disbursing process.

b. Supported Activity. Commanders of supported activities are responsible for:

(1) Ensuring accuracy in recording costs to customer orders to minimize the number and amount of customer order refunds.

(2) Ensuring that all customer orders requiring refunds that are financially complete are marked accordingly in CEFMS. Certain transactions in CEFMS may cause credits to work in process, which result in credit bills being generated, and do not require the customer order to be marked financially complete (IPAC credits).

(3) Reviewing and identifying customer order refunds.

(4) Performing a comprehensive joint unliquidated obligation (ULO) review that includes any unpaid bills with the requesting activity prior to initiating a customer order refund.

(5) Coordinating with and/or advising the requesting activity that a refund is forthcoming.

(6) Request assistance from UFC, Accounts Receivable/Debt Management Division for out-of-cycle generation of credit bills.

(7) Notifying the UFC, Accounts Receivable/Debt Management Division, in writing (preferably via email) if an upcoming customer order credit bill requires special instructions for disposition of the resulting refund.

(8) Eliminating requests to the UFC for credit bills when additional work is anticipated on which the prior month's credit can be offset or for which a customer order has not been marked financially complete in CEFMS.

(9) Printing/reviewing appropriation refund bills for their FOA (ERO) code regularly and making necessary decisions regarding the disposition of the refund.

6. PROCEDURES:

a. The USACE Finance Center shall process credit bills for customer orders that contain a financially complete indicator on the first workday of each month in conjunction with the standard monthly billing process.

(1) If specific disposition is required, written instructions should be provided by the supported activity including FOA (ERO) code, customer order number and amount.

(2) When no written instructions are provided and the resulting check is payable to a requesting activity, it is the responsibility of the UFC POC to contact the performing activity to inform them of any unpaid bills on the customer order. Performing activities will then make the decision to:

- (a) apply check to unpaid bills associated with the order, or
- (b) send customer order refund check to the requesting activity.

(3) IPAC credit bills will be transmitted from the performing activity database to the requesting activity database using the Government Billing Transaction process when performing activity and requesting activity are both Corps activities.

(4) Generate out-of-cycle credit bills when requested by performing activity to be applied to requesting activities customer order. Coordinate with Disbursing Division before generation of any out-of-cycle billing, whether it creates a treasury check or IPAC credit.

b. Supported Activities shall:

(1) Ensure that all customer order refunds that need to be marked financially complete are marked as such in CEFMS.

CEFC-FR
SOP Number UFC-16

Revised: 26 April 2004

(2) Request assistance from the UFC Accounts Receivable/Debt Management Division before generating any out-of-cycle billings.

(3) Coordinate with UFC Accounts Receivable/Debt Management Division POC when cost transfers or other transactions are processed that create negative amounts in the work in process and an out-of-cycle generation within the same month is necessary.

(4) Provide a statement that a comprehensive joint unliquidated obligation review on the order has been performed with the requesting agency and that no additional costs are anticipated on the customer order.

(5) Provide a statement that the requesting entity has been informed that the customer order refund is pending and that the refund will be applied to existing unliquidated bills or refunded to the requesting entity in the event that all bills are liquidated at that time.

(6) Re-obligate funds as needed when the responsible employee is automatically notified by email when an appropriation refund has been certified.

(7) Review credit unbilled work in progress and refer all discrepancies, comments or questions to the Chief, Accounts Receivable/Debt Management Division (CEFC-FR).

FOR THE DIRECTOR:

A handwritten signature in black ink, appearing to read "James R. Greene". The signature is fluid and cursive, with the first name "James" and last name "Greene" clearly distinguishable.

JAMES R. GREENE
Deputy Director, Administration
USACE Finance Center

SAMPLE LETTER FOR RETURN OF FUNDS TO FEMA

July 6, 1998

Construction-Operations Division

Federal Emergency Management Agency (FEMA)
Region IX
P.O. Box 29998
San Francisco, CA 94129
ATTN: Teri Mayor

1. The US Army Corps of Engineers, San Francisco District, is actively pursuing financial closeout of the FEMA-DR-1155-CA ESF-3 (California Floods of January 1997), mission assignment COE-SPD-01, amendments A through C. We received \$395,000 for Emergency Support Function 3. Our final billed costs of \$295,995.05 has been billed and reimbursed by FEMA.
2. We have conducted a review of funds and have determined no further cost will be incurred. We hereby request the remaining balance of \$99,004.95 be withdrawn.
3. Please direct your question to the undersigned at 000-000-0000.

Enclosure

(Signature Block)

Eligible/Ineligible Reimbursement

These items listed below should not be reimbursed:

Ice
Cooler
Pens
Paper Clips
Gatorade
Hand sanitizer and soap
Sunscreen, blanket and tissue

These items listed below are questionable and should be disallowed for payment until the employee provides justification from the District EM, Chief review and approval of questionable items:

Camera
Measuring Tape
Screwdrivers
Flash Drive Fasteners
Personal Cell Phone Usage
Safety glasses and hearing protection
Flashlights and batteries
Propane tanks and propane gas

These items listed below should be turned in before reimbursement can take place:

Map
Clipboards and other office supplies
Tolls – O.k. can be reimbursed
Unused computer supplies



DEPARTMENT OF THE ARMY
U.S. ARMY CORPS OF ENGINEERS
WASHINGTON, D.C. 20314-1000

REPLY TO
ATTENTION OF:

CERM-F

MAY 31 2006

MEMORANDUM FOR COMMANDERS, ALL MAJOR SUBORDINATE COMMANDS,
FIELD OPERATING ACTIVITIES AND ENGINEER RESEARCH DEVELOPMENT
CENTER

SUBJECT: Supported Verbal Memorandum For Record (MFR) for Early Responders Located at
Supporting Major Subordinate Commands (MSC)/Districts

1. Reference:


- a. Engineer Pamphlet, Chapter 5, Disaster Assistance Under the Robert T. Stafford Disaster Relief and Emergency Assistance Act, 42 U.S.C. 5121, ET SEQ, Paragraphs 5-4 and 5-6.
- b. ER 55-1-2, CELD-T, 1 Oct 02, Transportation and Travel Management, Chapter 2-7.
- c. Memorandum dated 03 Apr 06; Subject: Confirmatory Travel for First Responders During a Disaster.

2. The Federal Emergency Management Agency (FEMA) may request disaster assistance support that requires the United States Army Corps of Engineers (USACE) personnel to travel within 24 hours after receipt of a Verbal MFR/Mission Assignment from FEMA. Therefore, in order to satisfy the demand for timely response, the supported MSC/district may issue a Verbal Memorandum For Record to the supporting MSC/district for early responder(s) to depart. The Chief, Emergency Management, and the Chief, Finance and Accounting Office, and/or their designee(s) are required to sign this document. The supported and supporting MSC/district must set up a log sheet to ensure funds control. Early responders at the supported/supporting MSC/district must obtain confirmatory travel authorization as provided in the memorandum in reference 1.c. After 24 hours the supporting activity will not accept a "Verbal MFR".

3. My points of contact for this memorandum are Lisa Bordeaux, CERM-F, 202-761-1880, and Lizbeth Miller, CECW-HS-E, 202-761-0217.

FOR THE COMMANDER:

Encl


Wesley C. Miller
Director of Resource Management

TRACKING NUMBER-1605DR-COE-AL-COE-SAD-01
(Same as Verbal/MA number)
MSC/District

MEMORANDUM FOR RECORD VERBAL FUNDING

MFR

Date

SUBJECT: To Provide Verbal Funding Authorization to the Supporting
MSC/District for Early Responders

1. On (date/time), verbal funding authority for the following verbal/mission assignment has been authorized to (insert supporting MSC/District) for early responders to depart and initiating the mobilization of the ACI contractors to depart.
 - a. Mission: Example (Water)
 - b. FEMA Program Code: Example (1605DR-COE-AL-COE-SAD-01)
 - c. Event and Name Description: Example (Hurricane Donald)
 - d. Disaster State (2 letter designation): FL
 - e. Estimated Completion Date: Example (End date of Government Order)
 - f. Amount Authorized: Example (\$ amount of Government Order)
2. Funding for the Government Order will be transmitted from the supported MSC/District within 48 hours after receipt of the "Verbal MFR" by the supported MSC/District. The Supporting MSC/District will record the customer order in CEFMS upon receipt and attach a copy of the Verbal MFR to the customer order.

Signature
Name
Ch, Resource Mgr

Signature
Name
Ch, Emergency Mgr

SAMPLE LETTER FOR PARTIAL RETURN OF FUNDS TO FEMA

8 Mar 07

Construction-Operations Division

Federal Emergency Management Agency (FEMA)
Region IV
Atlanta, GA
ATTN: Sandy Wilson

1. Mission Assignment 1605DR-AL-COE-SAD-09, dated 17 Oct 2005, authorized \$148,000,000.00 for debris removal operations in the State of Alabama post Hurricane Katrina. To date our obligations total \$56,812,314.75. As the mission nears completion we can give back (\$amount) of the available balance.
2. Our records show \$91,187,685.25 authorized availability. We should be able to cover the remaining mission closeout with \$1,187,685.25, allowing \$90,000,000.00 of obligation authority to be returned.
3. Note we are NOT closing this mission assignment, only decreasing funds.

Enclosure

(Signature Block)



DEPARTMENT OF THE ARMY
U.S. Army Corps of Engineers
WASHINGTON, D.C. 20314-1000

REPLY TO
ATTENTION OF:


CESO-ZA (385)

20 Mar 2006

MEMORANDUM FOR ALL USACE COMMANDS
ATTN: SAFETY AND OCCUPATIONAL HEALTH MANAGERS

SUBJECT: Interim Safety Shoe Reimbursement Policy and Procedures

1. As required by Federal, Army, and USACE regulations, safety boots and shoes have traditionally been procured for USACE employees by their home organizations when their job duties required them.
2. The attached interim policy was developed in response to questions of procurement procedures for purchasing safety shoes when employees are at their normal duty station and for employees who purchased safety shoes for themselves while deployed to recent Emergency Response operations and subsequently requested reimbursement. This interim policy shall be used for the purchase and recordkeeping of all safety footwear, both in regular duty and in Emergency Response operations.
3. This interim policy precedes a general Personal Protective Equipment (PPE) Purchasing Policy, expected for publication during FY 2006. The HQUSACE POC for this policy and associated PPE issues is Karl Anderson, (202) 761-8567.


KARL A. ANDERSON
Acting Chief, HQUSACE Safety and
Occupational Health Office

3. Reimbursement

- a. When safety shoes are purchased by the employee from an outside vendor, submit the following for reimbursement:
 - 1. Safety Shoe Purchase Record signed by the supervisor
 - 2. Invoice, sales receipt or canceled check
 - 3. Claim for reimbursement (Standard Form 1164)
 - 4. Safety Shoes shall NOT be claimed on a TDY travel voucher Form 1351
- b. Safety shoe purchases are considered a function and financial responsibility of the activity where they are furnished. Employees who have not previously been issued safety shoes at their home station and are assigned (through an ENLink tasker or HQ/ Supported/ Supporting MSC/ District Direction) to a TDY Emergency Response position requiring safety shoes shall have them paid for by Emergency Response funding.

4. Property Accountability of Safety Shoes

- a. USACE property is for official use only. ER 700-1-1, Chapter 3 specifies general policies for the acquisition and management of issued personal property.
- b. All issued property, acquired by/from whatever source, whether purchased or not, must be accounted for as prescribed.
- c. Classification of safety shoes for property accountability purposes shall be in accordance with AR 710-2. Safety shoes are classified as Durable, Non-Recoverable property and will be controlled in accordance with the guidelines in AR 710-2.
- d. Army publication CTA 50-900 dated 31 July 03 provides at paragraph 4.h., that safety shoes are to be considered non-recoverable property.

5. Disposition of Safety Shoes

- a. Once issued, safety shoes shall remain under the care and control of the employee to whom they are issued. The safety shoes shall be used for any USACE mission where there is a requirement to use safety shoes as long as the safety shoes are serviceable and are ASTM/ ANSI rated for the intended use.
- b. Reissue or replacement of safety shoes shall only be done if the existing pair is determined by the home station or deployed location supervisor/ safety officer to be unserviceable due to wear or damage, or if additional pairs are justified. Unserviceable safety shoes shall be destroyed. Authorizations for individuals to purchase replacement safety shoes must indicate that shoes previously provided at government expense, or for which prior reimbursement was received, are unserviceable.
- c. Replacement of lost or stolen safety shoes shall be the responsibility of the employee.

SAFETY SHOE PURCHASE RECORD

<p>Privacy Act Statement: Title 5 of U.S. Code (301) authorizes collection of this information. Your supervisor will use this information to approve procurement of safety shoes. Furnishing the personal information in this form, is voluntary, but failure to do so may result in disapproval of this request.</p>				
Employee Name	Command	Employee CEFMS ID	Code	
Purchase Source	<input type="checkbox"/> Initial Issue <input type="checkbox"/> Reissue	Stock Number	Cost	Shoe Size
<p>Remarks:</p>				
<p>I certify that the employee listed above is a USACE employee, entitled to and required to wear safety shoes for work-related exposure to foot hazardous areas/operations and has not procured safety shoes at USACE expense within the past 12 months. If there are any exceptions, details are given above.</p>				
Name of Supervisor	Signature of Supervisor	Date		

Enclosure 1

USACE Authority for purchase of Safety Shoes for Employees.

1. REFERENCES:

- a. 29 U.S.C. 665, et. seq.
- b. 29 C.F.R. 1960.1, et. seq.
- c. Engineering Manual 385-1-1

2. Per Reference 1.a., the Corps has authority to use its appropriated funds to purchase safety shoes for the purpose of meeting OSHA requirements. Section 668, of Title 29, United States Code, requires the "head of each Federal agency . . . to establish and maintain an effective and comprehensive occupational safety and health program The head of each agency shall . . .

(2) acquire, maintain, and require the use of safety equipment, personal protective equipment, and devices reasonably necessary to protect employees." (emphasis added). Per reference 1c, the Corps requires employees to satisfy OSHA requirements by wearing protective footwear when exposed to hazards to the feet. See Chapter 5 A.08.

3. When an Activity or Position Hazard Analysis (AHA or PHA) - conducted by the supervisor, local safety official, or USACE safety manager – identifies duty hazards to the feet that cannot practically be controlled in other ways, USACE is required to purchase the safety shoes necessary to protect employees. Specific categories and types of safety shoes are identified in EM 385-1-1, the majority in Section 05.

4. On occasion, the hazards identified in an AHA or PHA require protective equipment or items other than the PPE listed in the categories/ types in EM 385-1-1 or other USACE policies and Regulations. In these cases, prior to purchase the items must be identified by HQUSACE policy as PPE required to comply with OSHA, or they must be justified by the requesting command as meeting the procurement policies for special clothing and equipment found in 5 U.S.C. §7903.

5. Issues concerning the organizational classification of protective equipment will be managed by HQUSACE Safety and Occupational Health Office.

Encl 2

Reading "Safety Shoe" Labels

To determine if your footwear is ASTM rated for specific hazards, read the footwear label:

ASTM F2413-05
F I/75 C/75 Mt75
PR
CS

Line #1: ASTM F2413-05: Identifies the ASTM standard – example indicates that the protective footwear meets the performance requirements of ASTM F2413 issued in 2005 (05). Vendors may still sell ANSI or ASTM Z41.1 1999 – compliant shoes until stocks are depleted. They are acceptable for use with the appropriate impact and compression ratings.

Line #2: F I/75 C/75 Mt75: Identifies, in order

- Gender [M (Male) or F (Female)] of the user.
- The existence of impact resistance (I), and rating (75 or 50 foot-pounds),
- The existence of compression resistance (C) and rating (75 or 50 which correlates to 2500 pounds. and 1750 pounds of compression respectively).
- The metatarsal designation (Mt) and rating (75 or 50 foot-pounds) is also identified.

For USACE work where protective-toe shoes are needed, the minimum compression and impact ratings are 75. Metatarsal rating only applies when needed.

Lines 3 & 4: PR CS Identify other specific types of hazards referenced in the standard. Line 4 is used when more than three sections of the ASTM standard are listed.

Specific Hazard Codes:

Cd: Conductive footwear intended to provide protection for the wearer against hazards of static electricity buildup and to reduce the possibility of ignition of explosives or volatile chemicals. The footwear facilitates electrical conductivity and the transfer of static electricity build up from the body to the ground. The electrical resistance ranges between zero and 500,000 ohms.

EH: Electrical shock resistant footwear made with non-conductive electrical shock resistant soles and heels. The outsole is intended to provide a secondary source of electric shock resistance protection to the wearer against the hazards from an incidental contact with live electrical circuits, electrically energized conductors, parts or apparatus. It is capable of withstanding 14,000 volts at 60 hertz for one minute with no current flow or leakage current in excess of 3.0 milliamperes, under dry conditions.

SD: Static dissipative footwear designed to provide protection against hazards due to excessively low footwear resistance and maintain a sufficiently high level of resistance to reduce the possibility of electric shock. The footwear must have a lower limit of electrical resistance of 10^6 ohms and an upper limit of 10^8 ohms.

PR Puncture resistant footwear is designed so that an integral and permanent puncture resistant plate is positioned between the insole and outsole. It is an part of the footwear. The puncture resistant footwear must show no signs of cracking after being subjected to 1.5 million flexes and have a minimum puncture resistance of 270 pounds.

CS: Chain saw cut resistant footwear designed to provide protection to the wearer's feet when operating a chain saw. It is intended to protect the foot area between the toe and lower leg. This footwear must meet the ASTM F1818 Specification for Foot Protection for Chainsaw Users standard.

DI: Dielectric insulation footwear is designed to provide additional insulation if accidental contact is made with energized electrical conductors, apparatus or circuits. It must meet the minimum insulation performance requirements of ASTM F1117 (Specification for Dielectric Footwear) and be tested in accordance with ASTM F1116 (Test Method for Determining Dielectric Strength of Dielectric Footwear).

NOTE: The new ASTM F2413-05 standard does not approve of "hang-on" or "strap-on" toe appliances, toe-caps or other devices as an acceptable means for providing protection. Any protective toe cap must be designed and constructed into the shoe during the manufacturing process and tested as an integral part of the footwear.

